Barriers faced by refugees with disabilities in accessing sexual and reproductive health services in Uganda.

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**Abstract** 

**Background:** According to the World Health Organisation (WHO), persons with a disability make up more than a billion (15%) of the global population. In Uganda, 6.5% of the general population

and 1.4% of the refugee population have some form of disability. It is noteworthy that refugees

with disabilities are some of the most marginalised groups in the world. The United Nations

Convention on the Rights of persons with Disabilities gives persons with disabilities the right to

access the same range, quality and standard of health care services as provided to other persons,

including those in the area of sexual and reproductive health. But refugees with disabilities still

face numerous barriers in accessing sexual and reproductive health services in Uganda. The study,

therefore, examined the barriers faced by refugees with disabilities in accessing sexual and

reproductive health services in Uganda.

**Methods:** The study findings were based on data from a household survey conducted among 74

refugees with disabilities living in Bidibidi refugee settlement. In addition, 15 interviews with the

health workers, representatives of persons with disabilities and district health office staff informed

the study. The quantitative data was entered into the Statistical Package for Social Scientists (SPSS

26.0), coded, cleaned and analysed. While the qualitative data was transcribed verbatim and

analysed using thematic and content analysis. The results were presented using descriptive

statistics.

**Results:** The study findings showed that the majority (73.1%) of the respondents mentioned

physical inaccessibility of the health facilities due to the lack of ramps, adjustable delivery beds

and disability-friendly washrooms. In addition, the study found that many (63.8%) refugees with

disabilities complained of the negative attitudes of the health workers and long waiting times.

Further still, language barriers among health workers and persons with disabilities with speech and

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sight impairments were observed. There was also a low level of awareness of sexual and reproductive health services due to the absence of disability-friendly sexual reproductive health rights promotion messaging and the withholding of information by care careers.

Conclusions: Refugees living with disabilities face several barriers in accessing sexual and reproductive health services in Uganda. The study recommends making health facilities in refugee settlements more disability friendly, in-service training of health workers in handling of persons with disabilities and sign language, and developing and widely publicising disability-friendly social and behaviour change communication messages on sexual and reproductive health rights of persons with disabilities.

**Keywords:** refugees, disabilities and sexual and reproductive health services